

**RUT-50-X Amended Vehicle Use Tax  
Transaction Return**

Rev 02 Form 108 Station 485

E S \_\_\_\_/\_\_\_\_/\_\_\_\_

EC RC CA ED NS

**Read this information first**

Everyone must complete Parts 1, 2, and 4. You must also complete Part 3 if you are changing financial information.

**Amount you are paying: \$ \_\_\_\_\_**  
**Make your check payable to "Illinois Department of Revenue."**

**Part 1: Identify yourself**

- 1 PV number from original return PV \_\_\_\_\_
- 2 Your name \_\_\_\_\_
- 3 Co-owner's name \_\_\_\_\_
- 4 Your address from original return  
 \_\_\_\_\_  
 Number and street  
 \_\_\_\_\_  
 City State ZIP
- 5 Daytime telephone number (\_\_\_\_) \_\_\_\_-\_\_\_\_
- 6 Your SSN \_\_\_\_\_  
 Social Security number
- 7 FEIN \_\_\_\_\_  
 Federal employer identification number
- 8 Driver's license number \_\_\_\_\_

**Part 2: Check the reason you are correcting your return (See instructions.)**

- 1 \_\_\_\_ The purchase date should have been  
 \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Month Day Year
- 2 \_\_\_\_ The vehicle was returned and the deal was cancelled.  
**Attach proof.**
- 3 \_\_\_\_ The seller's name, seller's address, or vehicle description (i.e., year, make, model, odometer reading, or VIN, ) is incorrect. Write the correct information below.  
**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Year:** \_\_\_\_\_  
**Make:** \_\_\_\_\_  
**Model:** \_\_\_\_\_  
**Odometer reading:** \_\_\_\_\_  
**VIN:** \_\_\_\_\_
- 4 \_\_\_\_ The purchase was exempt from tax because (Check one.)  
**a** \_\_\_\_ the purchase is exempt based on the tax-exempt status of the organization.  
 (Tax-exempt no.: **E** - \_\_\_\_\_)  
**b** \_\_\_\_ the vehicle is a farm implement, ready-mix concrete truck, or, for purchases **before** July 1, 2003, a replacement vehicle.  
**c** \_\_\_\_ the vehicle is used for rolling stock.  
 (Certificate of authority number: \_\_\_\_\_)  
**d** \_\_\_\_ you were an out-of-state resident and you used the vehicle, which was titled and registered in your name, in another state for at least three months.  
**e** \_\_\_\_ you are a surviving spouse, and the vehicle is an estate gift.  
**f** \_\_\_\_ the vehicle qualifies for the CDF sales tax exemption (purchases made on or after July 1, 2003 through June 30, 2005 only).
- 5 \_\_\_\_ The purchase qualified for one of the \$15 exceptions because (Check one.)  
**a** \_\_\_\_ you are a beneficiary who is not a surviving spouse, and the vehicle is an estate gift.  
**b** \_\_\_\_ the vehicle was transferred in a business reorganization and the beneficial ownership has not been changed.  
**c** \_\_\_\_ you are the spouse, parent, brother, sister, or child of the seller or transferor.
- 6 \_\_\_\_ The purchase was reported incorrectly as a motor vehicle but is actually a motorcycle or an ATV.
- 7 \_\_\_\_ Either the incorrect tax due amount was figured from Table A or Table B, or the incorrect table was used to figure the tax due amount. Write the original purchase price or fair market value of the vehicle on the line below.  
 \$ \_\_\_\_\_  
 Purchase price or fair market value
- 8 \_\_\_\_ Other. Please explain. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- Please turn this page over to complete Parts 3 and 4. ➡**



## Part 3: Correct your financial information

Complete this section only if you are changing financial information.  
Please round to the nearest whole dollar.

	<b>Column A</b> Most recent figures filed	<b>Column B</b> Figures as they should have been filed
<b>1</b> Write the tax amount	<b>1</b> _____	<b>1</b> _____
<b>2</b> Write the amount of credit for tax you previously paid to another state. _____ Write the name of the state here.	<b>2</b> _____	<b>2</b> _____
<b>Please attach proof. See instructions.</b>		
<b>3</b> Subtract Line 2 from Line 1. This is the tax due.	<b>3</b> _____	<b>3</b> _____
<b>4</b> Write the total amount you have paid. Compare Line 3, Column B, and Line 4. <ul style="list-style-type: none"><li>• If Line 4 is <b>greater than</b> Line 3, Column B, write the difference on Line 5.</li><li>• If Line 4 is <b>less than</b> Line 3, Column B, write the difference on Line 6.</li></ul>		<b>4</b> _____
<b>5</b> Overpayment — This is the amount you have overpaid. Go to Part 4 and sign this return.		<b>5</b> _____
<b>6</b> Underpayment — This is the amount you have underpaid. Please pay this amount. Go to Part 4 and sign this return. <b>Make your check payable to "Illinois Department of Revenue."</b>		<b>6</b> _____

## Part 4: Sign below

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

\_\_\_\_\_  
Your signature Date Co-owner's signature Date

\_\_\_\_\_  
Your mailing address (please print) City State ZIP

**Mail to:**  
ILLINOIS DEPARTMENT OF REVENUE  
PO BOX 19034  
SPRINGFIELD IL 62794-9034

**Note** Please write the amount you are paying on the line provided in the "Read this information first" section on the front of this return.